

**General Contractor/Subcontractor/Supplier List****General Contractor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

Amount of contract \$ \_\_\_\_\_

**Subcontractor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

Amount of contract \$ \_\_\_\_\_

**Subcontractor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

Amount of contract \$ \_\_\_\_\_

**Subcontractor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

Amount of contract \$ \_\_\_\_\_

**Project name** \_\_\_\_\_

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, ZIP

Start date of project \_\_\_\_\_

Ending date of project \_\_\_\_\_

**Please complete and return to:**

Department of Revenue  
Taxpayer Services Division  
Sales Tax Section  
P.O. Box 3863  
Baton Rouge, Louisiana 70821-3863

**Subcontractor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

Amount of contract \$ \_\_\_\_\_

**Subcontractor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

Amount of contract \$ \_\_\_\_\_

**Subcontractor**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

Amount of contract \$ \_\_\_\_\_

Supplier

Name

Address

City, State, ZIP

Supplier

Name

Address

City, State, ZIP

Supplier

Name

Address

City, State, ZIP

Supplier

Name

Address

City, State, ZIP

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City, State, ZIP